

# PHA Plans

## Streamlined Annual Version

U.S. Department of Housing and  
Urban Development  
Office of Public and Indian  
Housing

OMB No. 2577-0226  
(exp. 06/30/2006)

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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

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# Streamlined Annual PHA Plan

## for Fiscal Year: 2008

### PHA Name: Montgomery HRA

**NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.**

## Streamlined Annual PHA Plan Agency Identification

**PHA Name:** Montgomery HRA

**PHA Number:** MN033 001

**PHA Fiscal Year Beginning:** 01/01/2008

### PHA Programs Administered:

☐ **Public Housing and Section 8**

Number of public housing units:  
Number of S8 units:

☐ **Section 8 Only**

Number of S8 units:

☒ **Public Housing Only**

Number of public housing units: **41**

☐ **PHA Consortia:** (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

### PHA Plan Contact Information:

Name: Chris Goettl

Phone: 507-364-5650

TDD: 1-800-627-3529

Email (if available): parkman@frontiernet.net

### Public Access to Information

**Information regarding any activities outlined in this plan can be obtained by contacting:**  
(select all that apply)

☒ PHA's main administrative office ☐ PHA's development management offices

### Display Locations for PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. ☒ Yes ☐ No.

If yes, select all that apply:

☒ Main administrative office of the PHA  
☐ PHA development management offices  
☐ Main administrative office of the local, county or State government  
☐ Public library ☐ PHA website ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

☒ Main business office of the PHA ☐ PHA development management offices  
☐ Other (list below)

**Streamlined Annual PHA Plan**  
**Fiscal Year 2008**  
[24 CFR Part 903.12(c)]

**Table of Contents**

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

**A. PHA PLAN COMPONENTS**

- ☐ 1. Site-Based Waiting List Policies  
**903.7(b)(2) Policies on Eligibility, Selection, and Admissions**
- ☒ 2. Capital Improvement Needs  
**903.7(g) Statement of Capital Improvements Needed**
- ☐ 3. Section 8(y) Homeownership  
**903.7(k)(1)(i) Statement of Homeownership Programs**
- ☐ 4. Project-Based Voucher Programs
- ☒ 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- ☒ 6. Supporting Documents Available for Review
- ☒ 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- ☒ 8. Capital Fund Program 5-Year Action Plan

**Attachments to the Plan**

Resolution Amending Bylaws of the Montgomery HRA  
Nonsmoking Policy  
Violence Against Women Act

**B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE**

**Form HUD-50076, *PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Streamlined Annual Plan*** identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

**Form HUD-50070, *Certification for a Drug-Free Workplace*;**

**Form HUD-50071, *Certification of Payments to Influence Federal Transactions*;** and

**Form SF-LLL & SF-LLLa, *Disclosure of Lobbying Activities*.**

**1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)**

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

**A. Site-Based Waiting Lists-Previous Year**

1. Has the PHA operated one or more site-based waiting lists in the previous year? No  
If yes, complete the following table; if not skip to B.

Site-Based Waiting Lists				
Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics

2. What is the number of site based waiting list developments to which families may apply at one time? \_\_\_\_\_
3. How many unit offers may an applicant turn down before being removed from the site-based waiting list? \_\_\_\_\_
4. ☐ Yes ☐ No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

### B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.

1. How many site-based waiting lists will the PHA operate in the coming year? 0
2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?
3. ☐ Yes ☐ No: May families be on more than one list simultaneously  
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
  - ☐ PHA main administrative office
  - ☐ All PHA development management offices
  - ☐ Management offices at developments with site-based waiting lists
  - ☐ At the development to which they would like to apply
  - ☐ Other (list below)

## **2. Capital Improvement Needs**

[24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

### **A. Capital Fund Program**

1. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. ☐ Yes ☒ No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

### **B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)**

Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

1. ☐ Yes ☒ No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).
2. Status of HOPE VI revitalization grant(s):

HOPE VI Revitalization Grant Status	
a. Development Name:	
b. Development Number:	
c. Status of Grant:	
<input type="checkbox"/>	Revitalization Plan under development
<input type="checkbox"/>	Revitalization Plan submitted, pending approval
<input type="checkbox"/>	Revitalization Plan approved
<input type="checkbox"/>	Activities pursuant to an approved Revitalization Plan underway

3. ☐ Yes ☒ No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development name(s) below:

4. ☐ Yes ☒ No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5. ☐ Yes ☒ No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

**3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program**  
(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

1. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)
2. Program Description:
- a. Size of Program
- ☐ Yes ☐ No: Will the PHA limit the number of families participating in the Section 8 homeownership option?
- If the answer to the question above was yes, what is the maximum number of participants this fiscal year?
- b. PHA-established eligibility criteria
- ☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:
- c. What actions will the PHA undertake to implement the program this year (list)?

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner down payment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
- ☐ Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- ☐ Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):
- ☐ Demonstrating that it has other relevant experience (list experience below):

#### **4. Use of the Project-Based Voucher Program**

##### **Intent to Use Project-Based Assistance**

☐ Yes ☒ No: Does the PHA plan to “project-base” any tenant-based Section 8 vouchers in the coming year? If the answer is “no,” go to the next component. If yes, answer the following questions.

1. ☐ Yes ☐ No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
  - ☐ low utilization rate for vouchers due to lack of suitable rental units
  - ☐ access to neighborhoods outside of high poverty areas
  - ☐ other (describe below:)
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

#### **5. PHA Statement of Consistency with the Consolidated Plan**

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: State of Minnesota
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
  - ☒ The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
  - ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
  - ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
  - ☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
  - ☐ Other: (list below)
3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

The board approved a Nonsmoking Policy which has been implemented  
The HRA By-Laws have been updated

## 6. Supporting Documents Available for Review for Streamlined Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;</i>	5 Year and Annual Plans
X	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and



List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
X	Other supporting documents (optional) By-laws amendment; Non-Smoking Policy	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Management and Operations

## 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Montgomery HRA			<b>Grant Type and Number</b> Capital Fund Program Grant No: MN46P03350108 Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2008
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:      )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	0			
3	1408 Management Improvements	0			
4	1410 Administration	4,800			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	13,200			
10	1460 Dwelling Structures	30,000			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	0			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1499 Development Activities	0			
19	1501 Collateralization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	48,000			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

## **7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Montgomery HRA		<b>Grant Type and Number</b> Capital Fund Program Grant No: MN46P03350108 Replacement Housing Factor Grant No:				Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MN033-001	Operations – CFP Admin	1410	Lump sum	4,800				
MN033-001	Expand Front Parking Lot	1450	Lump sum	13,200				
MN033-001	Replace community room/office/hallway carpet	1460	Lump sum	30,000				
				48,000				

## **7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

### **Annual Statement/Performance and Evaluation Report**

### **Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

### **Part III: Implementation Schedule**

PHA Name:		<b>Grant Type and Number</b> Capital Fund Program No: MN46P03350108 Replacement Housing Factor No:					Federal FY of Grant: 2008
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MN033-001	2010			2012			

## 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Montgomery HRA			<b>Grant Type and Number</b> Capital Fund Program Grant No: MN46P03350107 Replacement Housing Factor Grant No:		<b>Federal FY of Grant: 2007</b>
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:     )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	0			
3	1408 Management Improvements	0			
4	1410 Administration	4,800			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	0			
10	1460 Dwelling Structures	19,045			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Nondwelling Structures	2,000			
13	1475 Nondwelling Equipment	17,600			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1499 Development Activities	0			
19	1501 Collateralization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	43,445			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs	9,000			
26	Amount of line 21 Related to Energy Conservation Measures	9,045			

## **7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Montgomery HRA		<b>Grant Type and Number</b> Capital Fund Program Grant No: MN46P03350107 Replacement Housing Factor Grant No:				Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MN033-001	Administration of this grant	1410	Lump sum	4,800				
MN033-001	Replace Garage Roof	1470	1	2,000				
MN033-001	Replace common area furniture 1 <sup>st</sup> and 2 <sup>nd</sup> floors	1475	Lump sum	17,600				
MN033-001	Repair Interior/Exterior Doors	1460	9	9,045				
MN033-001	Replace Water Meter	1460	1	1,000				
MN033-001	Install Security Camera System	1460	1	9,000				
	<b>TOTAL</b>			43,445				

**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name:		<b>Grant Type and Number</b> Capital Fund Program No: MN46P03350107 Replacement Housing Factor No:					Federal FY of Grant: 2007
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MN033-001	9/12/2009			9/12/2011			



## 8. Capital Fund Program Five-Year Action Plan

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHA Name: Montgomery HRA			Grant Type and Number Capital Fund Program Grant No: MN46P03350106 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3 9/18/07 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/18/07 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Rev 2	Rev 3	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	2,200	2,200	2,200	2,200
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	32,643	34,113.99	17,685.70	16,380.70
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	7,600	6,129.01	11,150.65	11,150.65
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	0	0	0	0
19	1501 Collateralization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	42,443	42,443	31,036.35	29,731.35
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs	4,725	13,193.60		
26	Amount of line 21 Related to Energy Conservation Measures	17,500	8,300.37		

## 8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II: Supporting Pages									
PHA Name: Montgomery HRA		Grant Type and Number MN46P03350106					Federal FY of Grant: 2006		
		Capital Fund Program Grant No:							
		Replacement Housing Factor Grant No:							
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
Name/HA-Wide Activities									
				Rev 2	Rev 3 9/07	Funds Obligated	Funds Expended		
MN003-001	Operations	14 06	Lump sum	2,200	2,200	2,200	2,200	Complete	
MN003-001	Replace Carpet/Flooring	14 60	10	7,218	11,506.50	11,506.50	11,506.50	Complete	
MN003-001	Replace Apt Windows	14 60	12	0	0	0	0	2012 project	
MN003-001	Repaint Tenant Units	14 60	8	0	0	0	0	2013 project	
MN003-001	Install Commercial Dishwasher in Community Room Kitchen	14 60	1	5,500	5,065.68	5,065.68	5,065.68	Complete	
MN003-001	Replace Tenant Unit Thermostats	14 60	61	12,000	1,113.52	1,113.52	1,113.52	2011 project	
MN033-001	Re-key tenant units	14 60	41	2,925	11,406.65	11,406.65	0	Funds obligated	
MN003-001	Dining Room Furniture	14 75	Lump sum	7,600	6,129.01	6,129.01	6,129.01	Complete	
MN003-001	Washers and Dryers	14 60	3	3,200	3,234.69	3,234.69	3,234.69	Complete	
MN033-001	Re-key building and common area locks	14 60	All locks	1,800	1,786.95	1,786.95	1,786.95	Complete	
	TOTAL				42,443	42,443	42,443	31,036.35	

## **8. Capital Fund Program Five-Year Action Plan**

### **Annual Statement/Performance and Evaluation Report**

### **Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

### **Part III: Implementation Schedule**

PHA Name: Montgomery HRA		<b>Grant Type and Number</b> Capital Fund Program No: MN46P03350106 Replacement Housing Factor No:					<b>Federal FY of Grant: 2006</b>
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Rev 2	Rev 3	Actual	Rev 2	Rev 3	Actual	
MN003-001	7/17/08	7/17/08		7/17/2010	7/17/10		

## 8. Capital Fund Program Five-Year Action Plan

### Capital Fund Program Five-Year Action Plan

#### Part I: Summary

PHA Name Montgomery HRA		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2 8/07			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant: 2009 PHA FY: 2009	FFY Grant: 2010 PHA FY: 2010	FFY Grant: 2011 PHA FY: 2011	FFY Grant: 2012 PHA FY: 2011
	See Annual Statement				
MN033-001		\$48,000	\$48,000	\$48,000	\$48,000
CFP Funds Listed for 5-year planning		\$48,000	\$48,000	\$48,000	\$48,000
Replacement Housing Factor Funds					

Development Number/Name/HA-Wide		Work Statement for Year 6	Work Statement for Year 7	Work Statement for Year 8	Work Statement for Year 9
		FFY Grant: 2013 PHA FY: 2013	FFY Grant: 2014 PHA FY: 2014	FFY Grant: 2015 PHA FY: 2015	FFY Grant: 2016 PHA FY: 2016
MN033-001		\$48,000	\$48,000	\$48,000	\$48,000
CFP Funds Listed for 5-year planning		\$48,000	\$48,000	\$48,000	\$48,000
Replacement Housing Factor Funds					

## 8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year: <u>2</u> FFY Grant: 2009 PHA FY: 2009			Activities for Year : <u>3</u> FFY Grant: 2010 PHA FY: 2010		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	MN033-001	Operations – CFP Admin	TBD	MN033-001	Operations – CFP Admin	TBD
Annual	MN033-001	Install Carbon Monoxide Detectors in Tenant Units 1460	TBD	MN033-001	Install handicapped entry system at front door of building	TBD
	MN033-001	Replace/Re-key Mail Boxes 1460	TBD	MN033-001	Install handicapped exits on N,W and E wings of building	TBD
Statement	MN033-001	Replace/Install Combination Heat/AC in tenant units	TBD			
	MN033-001	Roof Repair of main building				
Total CFP Estimated Cost			\$48,000			\$48,000

## **8. Capital Fund Program Five-Year Action Plan**

<b>Capital Fund Program Five-Year Action Plan</b>					
<b>Part II: Supporting Pages—Work Activities</b>					
Activities for Year: <u>  4  </u> FFY Grant: 2011 PHA FY: 2011			Activities for Year : <u>  5  </u> FFY Grant: 2012 PHA FY: 2012		
<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
MN033-001	Operations – CFP Admin	TBD	MN033-001	Administration of this grant	TBD
MN003-001	Replace Tenant Unit Thermostats	TBD	MN033-001	Replace stoves and refrigerators	TBD
MN033-001	Operations - Replace snow blower and lawn mower	3,000	MN033-001	Replace apartment windows	TBD
			MN033-001	Replace hall fans and air exchangers	TBD
Total CFP Estimated Cost		\$48,000			\$48,000

## 8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities					
Activities for Year: <u>  6  </u> FFY Grant: 2013 PHA FY: 2013			Activities for Year : <u>  7  </u> FFY Grant: 2014 PHA FY: 2014		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
MN033-001	Administration of this grant	TBD	MN033-001	Administration of this grant	TBD
MN033-001	Replace carpet/flooring in tenant units	TBD	MN033-001	Replace commercial air conditioners /heating units in community room and offices (4)	TBD
MN033-001	Repaint tenant units	TBD	MN033-001	Resurface Parking lot	TBD
MN033-001	Replace washers and dryers in laundry room	TBD	Total CFP Estimated Cost	\$48,000	
MN033-001	Replace Boilers	TBD			
MN033-001	Tuck Point brick building	TBD			
Total CFP Estimated Cost		\$48,000			

## **8. Capital Fund Program Five-Year Action Plan**

<b>Capital Fund Program Five-Year Action Plan</b>					
<b>Part II: Supporting Pages—Work Activities</b>					
Activities for Year: <u>8</u> FFY Grant: 2015 PHA FY: 2015					
Development Name/Number	Major Work Categories	Estimated Cost			
MN033-001	Administration of this grant	TBD			
MN033-001	Replace Elevator	TBD			
MN033-001	Seal coat /Stripe/Repair parking lot	TBD			
Total CFP Estimated Cost		\$48,000			



## Attachment

**MONTGOMERY HOUSING COMMISSION**  
**Amending Bylaws of the Housing and Redevelopment Authority of**  
**Montgomery, Minnesota**  
Resolution #   2   - 2007

BE IT RESOLVED that the bylaws of the Housing and Redevelopment Authority of Montgomery, Minnesota be amended as follows:

**ARTICLE I THE AUTHORITY**

Section 3 Office of Authority The offices of the Authority shall be at 300 Oak Avenue SE, in the city of Montgomery, State of Minnesota

**ARTICLE II OFFICERS**

Section 5 Executive Director

... A board member and/or the executive director shall sign all orders and checks for the payment of money and shall pay out and disburse such moneys under the direction of the Authority. Except as otherwise authorized by resolution of the Authority, all such orders and checks shall be counter-signed by a board member.

Section 7 Election or Appointment

... The Executive Director shall be appointed by the Authority. Any person appointed to fill the office of Executive Director or any vacancy therein, shall have such term as the Authority fixes, but no Commissioner of the Authority shall be eligible for this office.

Section 10 Board of Commissioners The Board of Commissioners of the Authority shall consist of five (5) commissioners appointed to terms of office by the Montgomery City Council as follows: Three (3) at-large commissioners with staggered terms; each term being five (5) years; One (1) city council representative, appointed annually; One (1) city administrator, appointed annually.

**ARTICLE III MEETINGS**

Section 5 Order of Business At the regular meetings of the Authority the order of business may be as follows:

Section 6 Manner of Voting The voting on all questions coming before the Authority shall be by voice vote, and the yeas and nays shall be entered upon the minutes of such meeting.

Masculine/feminine gender references have been updated throughout document.

Approved on Feb 20, 2007



Signed



Attest

## Attachment

### **MONTGOMERY HOUSING COMMISSION NONSMOKING POLICY LEASE ADDENDUM**

Resolution # 7 - 2006

**Purpose:**

The purpose of this policy is to 1) reduce the irritation and known health effects of second hand smoke; 2) reduce the increased cost of maintenance, cleaning, repainting and replacement of carpets due to smoking; 3) reduce the increased risk of fire from smoking.

Smoking is defined as inhaling, exhaling, breathing or carrying any lighted cigar, cigarette or other tobacco product or similar lighted product in any manner or in any form.

**Objectives:**

Pursuant to The Minnesota Clean Indoor Air Act (MCIAA) smoking is prohibited in all common areas of The Montgomery Housing and Redevelopment Authority AKA: Park Manor Apartments.

Effective immediately smoking is not permitted by new tenants and all guests of tenants in any apartment. Designated smoking areas are located outside the building near the west entrance and south of the building on the patio.

Tenants who signed leases prior to December 1, 2006, who have been smoking in their apartments will be allowed to continue to smoke in their apartments until October 1, 2007. From that date on all apartments will be smoke free.

Tenant acknowledges that Landlord's adoption of a smoke-free living environment, and the efforts to designate the rental complex as smoke-free, do not make the Landlord or any of its managing agents the guarantor of Tenant's health or of the smoke-free condition of the Tenant's unit. However, Landlord shall take reasonable steps to enforce the smoke-free terms of its lease and to make the complex smoke-free. Landlord is not required to take steps in response to smoking unless Landlord knows of said smoking or has been given notice of said smoking.

Tenant shall inform guests of the no-smoking policy and shall promptly give Landlord a written statement of any violation of this policy.

A violation of this policy is classified as a lease violation and may result in immediate eviction.

I have read and agree to the terms of this Lease Addendum. All other covenants, terms, and conditions of the lease remain the same.

\_\_\_\_\_  
Resident Signature/Date

\_\_\_\_\_  
Housing Authority Representative/Date

Adopted by the Montgomery HRA Board of Commissioners on 12-19-2006

  
\_\_\_\_\_  
Signed

  
\_\_\_\_\_  
Attest

## **Attachment**

### **Violence Against Women Act**

The Montgomery HRA enables the child and adult victims of domestic violence, dating violence sexual assault or stalking to obtain and maintain housing in accordance with the Violence Against Women Act (VAWA).

General information regarding VAWA was made available to residents during a monthly resident meeting. When needed, we are able to direct applicants and tenants to others in the area who can help including the local police department, area hospital, county service providers and have made available national hotlines for domestic violence, sexual assault and child abuse victims.

To prevent or enhance victim safety we are fortunate to be located in a small rural community and have a good working relationship with the local police department and county service providers. Through capital funds we are installing a security camera system throughout the building to increase tenant safety and security.